

2/7/2020

Division of Corporations

**M20000043890**

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

**Foreign Limited Liability Company  
Amius Futures LLC**

Certificate of Status	1
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2020 FEB 17 AM 9:37

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. AMIUS FUTURES LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

Illinois

2. (Jurisdiction under the law of which foreign limited liability company is organized)

3. (FEI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

141 W. JACKSON BLVD. STE 1711

5. (Street Address of Principal Office)

CHICAGO, IL 60604

141 W. JACKSON BLVD. STE 1711

6. (Mailing Address)

CHICAGO, IL 60604

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Worldwide Corporate Administrators LLC

Office Address: 2330 Ponce De Leon Blvd

Coral Gables, Florida 33134  
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Joseph Panholzer, Attorney-in-Fact

(Registered agent's signature)

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

**Title or Capacity:** **Name and Address:**

☒ Manager Name: DENNIS P FLYNN

☐ Member Address: \_\_\_\_\_

☐ Authorized 141 W JACKSON BLVD STE 1711

Person CHICAGO, IL 60604

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

☒ Manager Name: Eduardo Rodriguez

☐ Member Address: \_\_\_\_\_

☐ Authorized 7301 SW 57th Court, Suite 535

Person South Miami, FL 33143

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Adrian Brickell

☐ Member Address: \_\_\_\_\_

☐ Authorized 4th Floor, 55 Drury Lane

Person London WC2B 5SQ, United Kingdom

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Matthias Bormann

☐ Member Address: \_\_\_\_\_

☐ Authorized 4th Floor, 55 Drury Lane

Person London WC2B 5SQ, United Kingdom

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

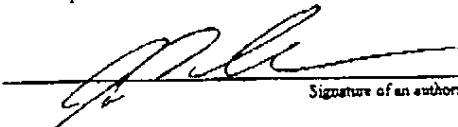
Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
 \_\_\_\_\_  
 Signature of an authorized person  
 Joseph Panholzer, Attorney-in-Fact for DENNIS P FLYNN, Manager  
 \_\_\_\_\_  
 Typed or printed name of signer

File Number

0168379-9



**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that*

AMIOUS FUTURES LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON NOVEMBER 16, 2005, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.

2020  
7  
AM 9:38



**In Testimony Whereof,** I hereto set  
my hand and cause to be affixed the Great Seal of  
the State of Illinois, this 7TH  
day of FEBRUARY A.D. 2020 .

*Jesse White*

SECRETARY OF STATE